

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number 28091/220										
CERTIFICATE OF MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Mail Stop _____, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or being facsimile transmitted to the USPTO at _____, on _____ Signature: _____ Name: _____	In re Application of Kaal et al.											
	Application Number 10/587,705	Filed October 3, 2006										
	For RETRACTABLE SYRINGE WITH PLUNGER DISABLING SYSTEM											
Group Art Unit 3763	Examiner Diva Ranade											
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate entity fee are as follows (check time period desired):</p> <table> <tr> <td><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$65/\$130)</td> <td>\$130.00</td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$245/\$490)</td> <td>\$_____</td> </tr> <tr> <td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$555/\$1110)</td> <td>\$_____</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$865/\$1730)</td> <td>\$_____</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1175/\$2350)</td> <td>\$_____</td> </tr> </table> <p> <input type="checkbox"/> Applicant claims small entity status. <input type="checkbox"/> A check to cover the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>141138</u>. I have enclosed a duplicate copy of this sheet. </p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p>I am the <input type="checkbox"/> applicant/inventor</p> <ul style="list-style-type: none"> <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) <u>Christopher B. Miller</u> <p><u>Christopher B. Miller</u> Signature</p> <p><u>July 9, 2010</u> Date</p> <p><u>Christopher B. Miller, Reg. 48,398</u> Typed or printed name</p> <p><u>(585) 263-1428</u> Telephone Number</p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input checked="" type="checkbox"/> Total of <u>1</u> form is submitted.</p>			<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$65/\$130)	\$130.00	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$245/\$490)	\$_____	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$555/\$1110)	\$_____	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$865/\$1730)	\$_____	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1175/\$2350)	\$_____
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